FORM

ALASKA CORPORATION NET INCOME TAX RETURN **SHORT FORM**

2	n	n	4
_	u	v	-

DEPARTMENT USE ONLY								
FSN.SEQ	ENVELOPE #							

										FSN.SEQ		ENVELOPE #			
4-611SF For the calendar	year 2004 c	or the ta	axable	year b	peginning			, 2	2004						
and e	nding endin	g			, _					<u> </u>		!			
Federal EIN		Alask	ca Cor	noratio	on File #	1	NAICC	Codo	Ala	aska Busine	ss Licens	 a #			
Todordi Eliv				ı	1 1		NAICS Code Alaska Business					Licelise #			
Name					1 1				Tel	ephone Nun	nber				
										•					
Mailing Address									Fax	x Number					
City		State)				Zip C	ode	E-N	j.					
Contact Person			Title							Contact Telephone Number					
Check applicable boxes:	VEC	NO	(Ob a	-l. V	NI-)	RETURN DATA									
☐ Final Alaska return	YES	NO	(Chec		s or No) federal ex	rtensio	on in effe	ct? If ve	es, attac	h copy of Fo	orm 7004.				
Name or address change since last year	ū	ū	2.							orporation?		ructions.)			
Limited Liability Company (LLC)			3.							group? If ye	s, you ma	y not use			
☐ Exempt organization (see instructions)☐ S-Corporation (Attach 1120S)			4							orm 04-611.	vuo) outoi	do of Alaska?			
■ S-Corporation (Attach 1120S)■ Homeowners Association (Attach 1120H)			4.									de of Alaska? Form 04-611.			
	CHEDUL	E A-S	3F - N												
							1				DE	PT USE ONLY			
Alaska income (loss) from Schedule B-SF						<u> </u>									
Alaska net operating loss deduction (attac											NL				
3. Alaska taxable income. Subtract line 2 fro										TI					
Alaska income tax from Schedule D-SF, I						—					TX				
5. Other taxes from Schedule E-SF, line 5						-	,				OT				
6. Federal-based credits from Schedule F, line 16 (see instructions)							() CR				
7. Total Tax. Sum of lines 4, 5 and 6							,)	10			
3. Incentive Credits (see instructions on pag						-	() IC				
). Alaska Education Credit (see instructions							() EC					
 Net Alaska income tax (line 7, net of lines Payments from page 2, Schedule C-SF 							+			NT DT					
_{1.} Fayments from page 2, scriedule C-SF 2. Tax due. If line 10 is larger than line 11, e						-	1				PT				
 Overpayment. If line 11 is larger than line 						-	+				+	-			
 Overpayment. If the FF is larger than line Penalty for underpayment of estimated ta 										UP					
 Penalty for failure to file (see instructions) 										PF					
 Penalty for failure to pay (see instructions) 										PP					
7. Interest (see instructions on page 4)											IN				
3. Total amount due (overpaid). Line 12 plus						-									
Overpayment credited to 2005 estimated									CF						
). Refund (line 18 reduced by line 19)						20			RF						
I de deservo de la constitución					L. P							DEDT HOE ONLY			
I declare, under penalties of perjury, that I best of my knowledge and belief, it is true,					-							DEPT USE ONLY			
information of which preparer has any kno		iu comp	лете.	Deciai	ration of p	перап	ei (Otilei i	ınan tax	.payei) i	s baseu on a	ווג	<u> </u>			
Officer's Signature	ougo.		Date			Title	9					REFUN			
s.															
Preparer's Signature			Date			Che	eck if \Box	Р	reparer's	SSN or PTIN	1	APPROVE			
<u> </u>							self-employed								
Firm's name (or			1			E.I.		ı							
yours if self-employed)												DA			
and address					Zip	Zip Code									
				Dept Use Only											
numbers on Schedule C					Validation Number:										

SCHEDULE B - SF - ALASKA INCOME (LOSS)

		SCH	EDULE B	- SF - ALA	SKA IN	NCO	ME (LO	SS)					
Federal taxa	able income, Form	1120, line 28 or F	orm 1120A	, line 24, as		_							
,	1									1			
2. Additions:	(a) All taxes base	d on or measured	d by net inc	ome		2	2a						
	(b) Other (Attach	schedule)				2	2b						
	(c) Total additions	s. Add 2(a) and 2	2(b)							2c			
3. Subtractions	s: (a) Interest from o	obligations of the	United Stat	es		3	Ва						
	(b) Special deduc	tions from Form	1120, Sche	dule C		3	Bb			1			
	(c) Other (Attach					-	3c						
	(d) Total subtracti	,								3d	1		
1 Alaska incor	me (loss). Add line												
	line 1	, , , , ,								4			
,													
	TAX RATE SO	CHEDULE (AS	3 43.20.01	l 1)				SCH	EDULE	E C -	· SF		
f your Alaska taxa		,		(5)			Fetir				nts Rec	ord	
i your riidona taxe	(2)			Of The	Estima	ated P		natea i	Date			Amount	
							1111		Date			Amount	
(1)	But Less	(3)	(4)	Amount	(1) 0	4-711							
At Least	Than	Your Tax Is	Plus	Over	(2) 0	4-711							
		1			· / ·								
					(3) 0	4-711							
-0-	10,000	-0-	1%	-0-									
10,000	20,000	100	2%	10,000	(4) 0	4-711							
20,000	30,000	300	3%	20,000	, ,								
30,000	40,000	600	4%	30,000	Tenta	ative T	ax 04-70	9					
40,000	50,000	1,000	5%	40,000			_						
50,000	60,000	1,500	6%	50,000	Overp	payme	ent From	Prior Yea	ır				
60,000 70,000	70,000 80,000	2,100	7% 8%	60,000 70,000	L ooo:	· Ouic	k Dofund	l (Form 4	466)		()
80,000	90,000	2,800 3,600	9%	80,000	LESS.	. Quic	K Kelulic	ı (FOIIII 4	400)		•		
90,000	•	4,500	9.4%	90,000	Total	Pavm	ents to S	Schedule	A. Line 1	1	\$		
1 - Alaska tayal	ble income from Sc			SF - ALASI		_		ATION A				В	
	gain, not to exceed						1						
-	tions)						2						
						_	3						
	come. Subtract line					L	3			_			
	tax on ordinary inc												
	e Tax Rate Schedu					_	4						
	capital gains. Multip					<u> </u>	5						
	and 5						6						
7. Enter the les	sser of line 6, colun	nn A or B here an	d on Sched	lule A, line 4			7						
		SCHED	OULE E - S	SF - OTHER	R TAXE	ES (A	S 43.20	0.021)					
							Α					В	
1. Alternative r	minimum tax from fe	ederal Form 4626	S		1a				x 18%	1b			
2. Credit for pr	ior year minimum ta	ax from Form 112	20. Schedul	e J	2a				x 18%	2b	()
	al taxes (attach sch								x 18%	3b	•		
	on corporate level t									. 4			
5. Total other t	axes. Add lines 1 t	through 4, enter h	nere and on	Schedule A, li	ne 5					. 5			
					Enter na	ame, a	address a	and feder	al EIN of	prev	ious busin	ess:	
If this is the	first return, indicate	whether:											
	New Business			•									
	Successor to prev	viously existing h	usiness										
_		,											
Campa 04 04 4	SE /Boy 12/04\\/	BFORM Ala	oko Coro N	lot Incomo Tay	Doturn	CUA	OT EMBI	,				Page	2